



Salmon Creek Soccer Club



2009 SPONSOR FORM

Sponsor Name _____ Date _____

(As it should appear on your plaque)

Contact Person _____ Phone _____

Web Address _____ E-Mail Address _____

Mailing Address _____

Please remit sponsor fee to:

**Salmon Creek Soccer Club
800 NE Tenney Rd.
Suite 110, #102
Vancouver, WA 98685**

Please provide this completed form with payment of sponsor fees.

***If sponsoring more than one team, please fill out separate forms.**

	Description	Each	Extended
—	U6 or U7 Team Sponsor Fees Team Name _____ Coach Name _____ Gender/Age _____ <small>(i.e. GU6 means a girl's team with players under 6 years of age.)</small>	\$150.00	_____
—	U8 or U9 Team Sponsor Fees Team Name _____ Coach Name _____ Gender/Age _____ <small>(i.e. BU9)</small>	\$200.00	_____
—	U10 thru U19 Team Sponsor Fees Team Name _____ Coach Name _____ Gender/Age _____ <small>(i.e. GU11)</small>	\$300.00	_____
		Total amount	

Thank you very much for your support!